

# Local Agency Conference Call

June 1, 2017



# State Updates

- Contract amendments- notified of award via email, paper amendments will be mailed
- Funding for WIC- FFY 18 proposed budget (president's) is 6.15 billion- this is OK assuming Congress does not cut it
- State Plan Updates- will be changing from 9 chapters to 3 sections, will look completely different- will review in August
- Participant Survey- coming next week
- Pump contract- extended one year, until June 18
- State Office Monitoring Update- CAPs finding

# WIC Work Group Accomplishments

- Initial review food list, collected recommendations for cardholder, food list and booklet (will review again before printed)
- Initial review of data as we currently track- added data for prematurity and low birth weight rates, and entry into WIC during pregnancy trimester
- Review of outreach efforts, collected suggestions on upcoming outreach campaign and other activities
- Developed participant survey (and discussed past participant survey)
- Reviewed and revised Prescription Form(s)- coming this Fall
- Review and revised Nutrition Assessment Questions (NAQ)- currently working on



# eWIC Updates (Kate)

- Kicking off Pilot JUNE 8<sup>th</sup> in Lewis & Clark & Broadwater and JUNE 15<sup>th</sup> in Butte & Anaconda
- Review Strategy Document

# Technology & Retailers (Kevin)

- WIC Shopper App
- Level 3 Certifications
- Retailer Training & Conference Calls
- Website Updates
- FAQ



# Food List (Chris)

- See 2 pager for details
- eWIC only items- marked
- Will use this form to hand out with September benefits until booklet is ready in September
- Some items on new food list may not be purchased with checks (new sizes, tofu...)

# eWIC Planning (Lacy)

- Will get- card readers, cards, and card holders ahead of rollout (few weeks)
- Will need to block some time to work on food package updates
- Will possibly need to dedicate time to level 3 certifications (LARC/Super User primarily)
- Will need to have more time with appointments to explain use of cards
- Will need to attend 2 day training



# Training for eWIC

- Super User's
  - Point of contact for State Office and Local Agency Staff
  - Super Users have been attending monthly conference calls
  - Each agency has at least one
- Pilot June 5<sup>th</sup>-6<sup>th</sup> – Everyone signed up
- June 5<sup>th</sup>, sign ups will go out in newsletter
  - Super users, CPA, RD, Aides, etc.
  - On sign up sheet, pick a 1<sup>st</sup> -3<sup>rd</sup> option for dates
  - Limited space
  - Please keep in mind the training locations and traveling together



# Training Dates

- Pilot:
  - June 5<sup>th</sup> and 6<sup>th</sup>
- State Wide:
  - Helena August 22<sup>nd</sup>-23<sup>rd</sup>
  - Great Falls August 29<sup>th</sup>-30<sup>th</sup>
  - Billings September 6<sup>th</sup>-7<sup>th</sup>
  - Missoula September 12<sup>th</sup>-13<sup>th</sup>

**QUESTIONS SO FAR...**



# Funding Discussion

Kate Girard  
Stacy Purdom



# WIC Funding Overview

- USDA federal funds through Food and Nutrition Services (FNS) through regions → States
  - Region hangs onto 10% and reallocates a few times during the year
    - “Operational Adjustment”
    - Also take back unspent money from some states and “reallocate” to others
  - *Base funding based on **participation alone**; additional funding depends on need*
  - Funding levels are not truly known until mid-year, so everyone “assumes” that they are getting the same as the previous year
  - Other grants- Infrastructure, Breastfeeding Peer Counselor & Farmer’s Market are separate
  - Funding divided between FOOD & ADMINISTRATION



# WIC Funding Overview

- Food- about \$9.6 (not including rebates... about 3 million)
- NSA- about \$5 million (consider carry over, OA, reallocation)
  - Just over 4.1 million to local agency contracts
  - About 1 million is State Budget (salaries/benefits, operations)



# Funding Formula

- Previously developed and discussed annually with WIC Futures Study Group
- General structure maintained- still primarily based on participation
- Generally developed making a lot of assumptions, such as consistent funding and additional funding throughout year from FNS (OA, reallocation, etc.)
- Know that numbers can change if congress/FNS does not fully fund us

# Funding, continued

- Plan- today we will walk through the spreadsheet
  - Discuss formula
  - Answer questions
  - Consider options for change...
- Would like comments, questions, etc. by June 16<sup>th</sup>
  - Email Kate at [kgirard@mt.gov](mailto:kgirard@mt.gov), please cc Stacy at [spurdom@mt.gov](mailto:spurdom@mt.gov)



# Funding Review

- Walk through each column & explain
- 2 Spreadsheets
  - Option 1 is same as last year except updated funding levels (see BFPC columns) and participation number changes
  - Option 2 zeros out base funding (\$2000 per agency) and lead funding \$4000 per lead), and puts this \$110,000 into participation calculation
  - Option 3 is not shown-
    - Consider- keeping base; redistributing “lead” money to all agencies with outlying/satellite clinics (see next slide for rationale)
    - Would need to figure out equitable way to do this (travel costs, frequency of clinic, sub-contract vs. travel from main clinic...)



# Lead Clinic Funding

- Original definition- an agency who held a contract that included a service area outside of their normal parameters (i.e more than one county)
- Justification- additional travel, training, oversight, administration costs, visiting more stores, doing additional outreach, etc.
  - Perk- streamline funding and contracting, small towns are served
- Problem- see next slide

# Issue with current “lead” funding

- County “A” could have 4 clinics, but only serve their county, they get no “lead” money, despite travel and costs of multiple clinics
- County “B” could have 1 clinic in their county, and 1 clinic in another county (only visit once a month, or every other month) and they would get \$4000/year. They may not have any costs associated with 2<sup>nd</sup> clinic other than staff time/travel (same as, or less than, County “A”)
- Reservation could cover large geographic region, several counties, and have many clinics... but not get \$4000

# “Lead” funding- more factors

- Again- some clinics have high costs (admin fees, rent, extra equipment, additional staffing); some have almost no cost (free space, same staff as main clinic, etc.)
- Some outlying clinics are run frequently (several times per week), others are only run once every 3 months... no difference in funding
- Costs associated with outlying clinics should focus on overhead and logistics, not so much staffing (considered with participation money- mostly).

**Questions/Discussion**  
**(please save specific comments about  
your funding for comment period)**

